

B-63111

FILED
05 MAY 23 PM 2:54
RICHARD J. WILKING
U.S. DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA
MH P
550

UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA

CV 08 2629

JOSEPH BIVINS

Plaintiff,

vs.

CONTRA CONSTA CITY ET AL

Defendant.

CASE NO. _____

PRISONER'S
APPLICATION TO PROCEED
IN FORMA PAUPERIS

I, JOSEPH BIVINS, declare, under penalty of perjury that I am the plaintiff in the above entitled case and that the information I offer throughout this application is true and correct. I offer this application in support of my request to proceed without being required to prepay the full amount of fees, costs or give security. I state that because of my poverty I am unable to pay the costs of this action or give security, and that I believe that I am entitled to relief.

In support of this application, I provide the following information:

1. Are you presently employed? Yes ____ No NO

If your answer is "yes," state both your gross and net salary or wages per month, and give the name and address of your employer:

Gross: 0 Net: 0

Employer: NONE

If the answer is "no," state the date of last employment and the amount of the gross and net salary

1 and wages per month which you received. (If you are imprisoned, specify the last place of
2 employment prior to imprisonment.)
3 _____
4 _____
5 _____

6 2. Have you received, within the past twelve (12) months, any money from any of the following
7 sources:

- 8 a. Business, Profession or Yes ____ No ☒
9 self employment
- 10 b. Income from stocks, bonds, Yes ____ No ☒
11 or royalties?
- 12 c. Rent payments? Yes ____ No ☒
13 d. Pensions, annuities, or Yes ____ No ☒
14 life insurance payments?
- 15 e. Federal or State welfare payments, Yes ____ No ☒
16 Social Security or other govern-
17 ment source?

18 If the answer is "yes" to any of the above, describe each source of money and state the amount
19 received from each.
20 _____
21 _____

22 3. Are you married? Yes ____ No ☒

23 Spouse's Full Name: _____

24 Spouse's Place of Employment: _____

25 Spouse's Monthly Salary, Wages or Income:

26 Gross \$ 0 Net \$ 0

27 4. a. List amount you contribute to your spouse's support: \$ 0

28 b. List the persons other than your spouse who are dependent upon you for support

1 and indicate how much you contribute toward their support. (NOTE: For minor
2 children, list only their initials and ages. DO NOT INCLUDE THEIR NAMES.).
3 _____
4 _____

5 5. Do you own or are you buying a home? Yes ___ No X

6 Estimated Market Value: \$ 0 Amount of Mortgage: \$ _____

7 6. Do you own an automobile? Yes ___ No X

8 Make _____ Year _____ Model _____

9 Is it financed? Yes ___ No ___ If so, Total due: \$ _____

10 Monthly Payment: \$ _____

11 7. Do you have a bank account? Yes ___ No ___ (Do not include account numbers.)

12 Name(s) and address(es) of bank: _____
13 _____

14 Present balance(s): \$ 0

15 Do you own any cash? Yes ___ No X Amount: \$ 0

16 Do you have any other assets? (If "yes," provide a description of each asset and its estimated
17 market value.) Yes ___ No X
18 _____

19 8. What are your monthly expenses?

20 Rent: \$ _____ Utilities: _____

21 Food: \$ _____ Clothing: _____

22 Charge Accounts:

23 <u>Name of Account</u>	<u>Monthly Payment</u>	<u>Total Owed on This Acct.</u>
24 _____	\$ <u>0</u>	\$ <u>0</u>
25 _____	\$ <u>0</u>	\$ <u>0</u>
26 _____	\$ <u>0</u>	\$ <u>0</u>

27 9. Do you have any other debts? (List current obligations, indicating amounts and to whom
28 they are payable. Do not include account numbers.)

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10. Does the complaint which you are seeking to file raise claims that have been presented in other lawsuits? Yes ___ No X

Please list the case name(s) and number(s) of the prior lawsuit(s), and the name of the court in which they were filed.

I consent to prison officials withdrawing from my trust account and paying to the court the initial partial filing fee and all installment payments required by the court.

I declare under the penalty of perjury that the foregoing is true and correct and understand that a false statement herein may result in the dismissal of my claims.

May 12, 2008
DATE

Joseph Birinis
SIGNATURE OF APPLICANT

Case Number: _____

CERTIFICATE OF FUNDS

IN

PRISONER'S ACCOUNT

I certify that attached hereto is a true and correct copy of the prisoner's trust account statement showing transactions of Joseph B. BIVINS for the last six months at

[prisoner name].

Folsom Prison where (s)he is confined.

[name of institution]

I further certify that the average deposits each month to this prisoner's account for the most recent 6-month period were \$ 22.47 and the average balance in the prisoner's account each month for the most recent 6-month period was \$ 53.43.

Dated: 5/14/08

Wayne C. Davis

[Authorized officer of the institution]

REPORT ID: TS3030 .701

CALIFORNIA DEPARTMENT OF CORRECTIONS
CALIFORNIA STATE PRISON FOLSOM
INMATE TRUST ACCOUNTING SYSTEM
INMATE TRUST ACCOUNT STATEMENT

REPORT DATE: 05/14/08
PAGE NO: 1

FOR THE PERIOD: NOV. 01, 2007 THRU MAY 14, 2008

ACCOUNT NUMBER : B63111
ACCOUNT NAME : BIVINS, JOSEPH B
PRIVILEGE GROUP: A
BED/CELL NUMBER: B3SAT100000029L
ACCOUNT TYPE: I

TRUST ACCOUNT ACTIVITY				WITHDRAWALS	BALANCE
DATE	DESCRIPTION	COMMENT	CHECK NUM	DEPOSITS	
11/01/2007	BEGINNING BALANCE				8.55
11/07 D554	INMATE PAYROL 702351LP10			27.00	35.55
11/15*W415	CASH WITHDRAW 702508	220052671		5.00	30.55
12/06 D554	INMATE PAYROL 702833IP11			21.06	51.61
ACTIVITY FOR 2008					
01/07 D554	INMATE PAYROL 703366IP12			27.00	78.61
02/06 D554	INMATE PAYROL 703989IP01			19.89	98.50
02/11 FC01	DRAW-FAC 1 704122			98.50	0.00
03/06 D554	INMATE PAYROL 704569IP02			12.87	12.87
03/10 FR01	CANTEEN RETUR 704640			3.55-	16.42
04/04 D554	INMATE PAYROL 705090IP03			27.00	43.42

TRUST ACCOUNT SUMMARY

BEGINNING BALANCE	TOTAL DEPOSITS	TOTAL WITHDRAWALS	CURRENT BALANCE	HOLDS BALANCE	TRANSACTIONS TO BE POSTED
8.55	134.82	99.95	43.42	0.00	0.00

CURRENT AVAILABLE BALANCE 43.42

THE WITHIN INSTRUMENT IS A CORRECT COPY OF THE TRUST ACCOUNT MAINTAINED BY THIS OFFICE
ATTEST: 5/14/08
CALIFORNIA DEPARTMENT OF CORRECTIONS
BY [Signature] TRUST OFFICE

Current balance is = \$43.42
Avg. six months deposits = \$ 22.47
Avg. six months balance = \$ 53.43

PROOF OF SERVICE BY MAIL

I JOSEPH BIVINS, AM A RESIDENT OF FOLSOM STATE PRISON IN THE COUNTY OF SACRAMENTO, STATE OF CALIFORNIA. I AM OVER THE AGE OF 18 YEARS, AND I AM /AM NOT A PARTY TO THIS ACTION.

MY PRISON NUMBER IS: B-63111

MY PRISON ADDRESS IS; P.O. BOX 950, Folsom, Ca. 95763

ON May 13, 2008, 2008, I SERVED A COPY OF THE FOLLOWING DOCUMENT:

fees waiver application and order for the Northern District Court

ON THE FOLLOWING PARTIES BY PLACING THE DOCUMENTS IN A SEALED ENVELOPE WITH POSTAGE FULLY PAID, IN THE UNITED STATES MAIL, IN A DEPOSIT BOX SO PROVIDED AT FOLSOM STATE PRISON (MAILBOX RULE), FOLSOM, CALIFORNIA, ADDRESSED AS FOLLOWS:

Northern district Court for the District court of California 450 Golden gate
San Francisco, Ca., 95814

THERE IS DELIVERY SERVICE BY THE UNITED STATES MAIL AT THE PLACE SO ADDRESSED, AND/OR THERE IS REGULAR COMMUNICATION BY MAIL BETWEEN THE PLACE OF MAILING AND THE PLACE SO ADDRESSED.

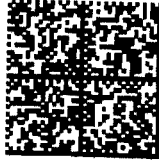
I DECLARE UNDER THE PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

EXECUTED 5/13/2008, 2008, AT FOLSOM, CALIFORNIA..


<signature here>

JOSEPH BIVINS B-63111
Folsom State Prison
PO Box 950 31A1-29L
Folsom, CA 95763

PRISON GENERATED MAIL
FOLSOM STATE PRISON
PO BOX 715071
REPRESENTA CA 95671



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MAY 21 2008
RICHARD W. WIEKING
CLERK, U.S. DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA

Office of the Clerk
U.S. District Court
Northern District of Calif.
450 Golden Gate Ave
San Francisco, CA 94102

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NORTHERN DISTRICT OF CALIFORNIA

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5/16/08

CC: R. Scicluna

Legal
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